| 1  | SECTION 2169m. 138.056 (1) (c) of the statutes is amended to read:                          |
|----|---------------------------------------------------------------------------------------------|
| 2  | 138.056 (1) (c) "Mobile home transaction" means a consumer credit sale, as                  |
| 3  | defined in s. 421.301 (9), of or a consumer loan, as defined in s. 421.301 (12), secured    |
| 4  | by a first lien or equivalent security interest in a mobile home, as defined in s. $218.10$ |
| 5  | (2) 101.91 (2e).                                                                            |
| 6  | SECTION 2169pc. 138.09 (1m) (b) 1. (intro.) of the statutes is amended to read:             |
| 7  | 138.09 (1m) (b) 1. (intro.) An Except as provided in par. (c), an application               |
| 8  | under par. (a) for a license shall contain the following:                                   |
| 9  | SECTION 2169pf. 138.09 (1m) (c) of the statutes is created to read:                         |
| 10 | 138.09 (1m) (c) 1. If an applicant who is an individual does not have a social              |
| 11 | security number, the applicant, as a condition of applying for or applying to renew         |
| 12 | a license, shall submit a statement made or subscribed under oath or affirmation to         |
| 13 | the division that the applicant does not have a social security number. The form of         |
| 14 | the statement shall be prescribed by the department of workforce development.               |
| 15 | 2. Notwithstanding sub. (3) (b), any license issued or renewed in reliance upon             |
| 16 | a false statement submitted by an applicant under subd. 1. is invalid.                      |
| 17 | SECTION 2169pm. 138.09 (3) (am) 1. of the statutes is amended to read:                      |
| 18 | 138.09 (3) (am) 1. The applicant fails to provide the any information required              |
| 19 | under sub. (1m) (b).                                                                        |
| 20 | <b>SECTION 2169r.</b> 138.09 (7) (jm) 1. b. of the statutes is amended to read:             |
| 21 | 138.09 (7) (jm) 1. b. The loan administration fee is charged for a consumer loan            |
| 22 | that is secured primarily by an interest in real property or in a mobile home, as           |
| 23 | defined in s. 218.10 (2) 101.91 (2e).                                                       |
| 24 | <b>SECTION 2169s.</b> 139.03 (5) (b) of the statutes is renumbered 139.03 (5) (b) 1. and    |
| 25 | amended to read:                                                                            |
|    |                                                                                             |

| 139.03 (5) (b) 1. Any Except as provided in subd. 2., any person, except an            |
|----------------------------------------------------------------------------------------|
| underage person as defined under s. 125.02 (20m), who leaves a foreign country, after  |
| spending at least 48 hours in that foreign country, with the purpose of entering this  |
| state may have in that person's possession and bring into the state intoxicating       |
| liquor or wine in sealed original containers in amounts not to exceed, in the          |
| aggregate, 4 liters without payment of the tax imposed under this subchapter. The      |
| 4 liters of tax–free intoxicating liquor and wines may not be sent, shipped or carried |
| into the state other than in the immediate possession of the person as qualified by    |
| this subsection.                                                                       |

**SECTION 2169t.** 139.03 (5) (b) 2. of the statutes is created to read:

139.03 (5) (b) 2. A person who is a member of the national guard, the U. S. armed forces or a reserve component of the U. S. armed forces; who is a state resident; and who leaves a foreign country, after spending at least 48 hours in that foreign country on duty or for training, with the purpose of entering into this state may bring into the state, in sealed original containers and in the person's immediate possession, intoxicating liquor and wine in an aggregate amount not exceeding 16 liters without paying the tax imposed under this subchapter on that amount.

SECTION 2170a. 138.12 (5) (a) of the statutes is amended to read:

138.12 (5) (a) The commissioner <u>division</u> may revoke or suspend the license of any insurance premium finance company if the commissioner <u>division</u> finds that <u>any</u> of the following:

- 1. Any license issued to such company was obtained by fraud,
- 2. There was any misrepresentation in the application for the license,
- 3. The holder of such license has otherwise shown himself or herself untrustworthy or incompetent to act as a premium finance company,.

| 1  | 4. Such The company has violated any provision of this section, or.                    |
|----|----------------------------------------------------------------------------------------|
| 2  | 5. Such The company has been rebating part of the service charge as allowed            |
| 3  | and permitted herein to any insurance agent or insurance broker or any employe of      |
| 4  | an insurance agent or insurance broker or to any other person as an inducement to      |
| 5  | the financing of any insurance policy with the premium finance company.                |
| 6  | <b>SECTION 2170d.</b> 138.12 (3) (d) 1. (intro.) of the statutes is amended to read:   |
| 7  | 138.12 (3) (d) 1. (intro.) An Except as provided in par. (e), an application for       |
| 8  | a license under this section shall contain the following:                              |
| 9  | Section 2170g. 138.12 (3) (e) of the statutes is created to read:                      |
| 10 | 138.12 (3) (e) 1. If an applicant who is an individual does not have a social          |
| 11 | security number, the applicant, as a condition of applying for or applying to renew    |
| 12 | a license under this section, shall submit a statement made or subscribed under oath   |
| 13 | or affirmation to the division that the applicant does not have a social security      |
| 14 | number. The form of the statement shall be prescribed by the department of             |
| 15 | workforce development.                                                                 |
| 16 | 2. Any license issued or renewed in reliance upon a false statement submitted          |
| 17 | by an applicant under subd. 1. is invalid.                                             |
| 18 | SECTION 2170n. 138.12 (5) (am) 1. c. of the statutes is amended to read:               |
| 19 | 138.12 (5) (am) 1. c. In the case of a licensee who is an individual, the applicant    |
| 20 | fails to provide his or her social security number, fails to comply, after appropriate |
| 21 | notice, with a subpoena or warrant that is issued by the department of workforce       |
| 22 | development or a county child support agency under s. 59.53 (5) and that is related    |
| 23 | to paternity or child support proceedings or the applicant is delinquent in making     |
| 24 | court-ordered payments of child or family support, maintenance, birth expenses         |

medical expenses or other expenses related to the support of a child or former spouse,

| 1  | as provided in a memorandum of understanding entered into under s. 49.857. An         |
|----|---------------------------------------------------------------------------------------|
| 2  | applicant whose renewal application is denied under this subd. 1. c. is entitled to a |
| 3  | notice and hearing under s. 49.857 but is not entitled to a hearing under par. (b).   |
| 4  | SECTION 2171. 139.30 (5) of the statutes is amended to read:                          |
| 5  | 139.30 (5) "Indian tribe" means a federally recognized American Indian tribe          |
| 6  | or band in this state.                                                                |
| 7  | SECTION 2171m. 139.30 (13m) of the statutes is created to read:                       |
| 8  | 139.30 (13m) "Trust lands" means any lands in this state held in trust by the         |
| 9  | U. S. government for the benefit of a tribe or a member of a tribe.                   |
| 10 | SECTION 2171p. 139.32 (5) of the statutes is amended to read:                         |
| 11 | 139.32 (5) Manufacturers and distributors having a permit from the secretary          |
| 12 | shall receive a discount of $\frac{1.6\%}{2\%}$ of the tax.                           |
| 13 |                                                                                       |
| 14 | SECTION 2173. 139.75 (4d) of the statutes is created to read:                         |
| 15 | 139.75 (4d) "Enrolled member" has the meaning given in s. 139.30 (4).                 |
| 16 | SECTION 2174. 139.75 (4p) of the statutes is created to read:                         |
| 17 | 139.75 (4p) "Indian tribe" has the meaning given in s. 139.30 (5).                    |
| 18 | SECTION 2175. 139.75 (6m) of the statutes is created to read:                         |
| 19 | 139.75 (6m) "Reservation" has the meaning given in s. 139.30 (9).                     |
| 20 | SECTION 2175m. 139.75 (12m) of the statutes is created to read:                       |
| 21 | 139.75 (12m) "Trust lands" has the meaning given in s. 139.30 (13m).                  |
| 22 | SECTION 2176. 139.76 (1) of the statutes is amended to read:                          |
| 23 | 139.76 (1) An occupational excise tax is imposed upon the sale, offering or           |
| 24 | exposing for sale, possession with intent to sell or removal for consumption or sale  |
| 25 | or other disposition for any purpose of tobacco products by any person engaged as a   |
|    |                                                                                       |

6.

distributor of them at the rate of 20% of the manufacturer's established list price to distributors without diminution by volume or other discounts on domestic products. On products imported from another country the rate of tax is 20% of the amount obtained by adding the manufacturer's list price to the federal tax, duties and transportation costs to the United States. The tax attaches at the time the tobacco products are received by the distributor in this state. The tax shall be passed on to the ultimate consumer of the tobacco products. All tobacco products received in this state for sale or distribution within this state, except tobacco products actually sold as provided in sub. (2), shall be subject to such tax.

**SECTION 2177.** 139.76 (2) of the statutes is amended to read:

139.76 (2) Tobacco products sold to or by post exchanges of the U.S. armed forces, to or by federally or state-operated veterans hospitals in this state, and tobacco products sold to an interstate carrier of passengers for hire to be resold to bona fide passengers actually being transported and tobacco products sold for shipment outside this state in interstate commerce are not subject to the tax. The tax imposed by sub. (1) and s. 139.78 shall not apply with respect to any tobacco products which under the constitution and laws of the United States may not be taxed by this state.

**SECTION 2178.** 139.803 of the statutes is created to read:

139.803 Refunds to Indian tribes. The department may refund 70% of the taxes collected under s. 139.76 (1) in respect to sales on reservations or trust lands of an Indian tribe to the tribal council of the tribe having jurisdiction over the reservation or trust land on which the sale is made only if all of the following conditions are fulfilled:

(1) The tribal council has filed a claim for the refund with the department.

| 1  | (2) The tribal council has approved the retailer.                                    |
|----|--------------------------------------------------------------------------------------|
| 2  | (3) The land on which the sale occurred was designated a reservation or trust        |
| 3  | land on or before January 1, 1983.                                                   |
| 4  | (4) The tobacco products were not delivered by the retailer to the buyer by          |
| 5  | means of a common carrier, a contract carrier or the U.S. postal service.            |
| 6  | (5) The retailer has not sold the tobacco products to another retailer or to a       |
| 7  | subjobber.                                                                           |
| 8  | SECTION 2179. 139.805 of the statutes is created to read:                            |
| 9  | 139.805 Agreements with Indian tribes. The department may enter into                 |
| 10 | agreements with Indian tribes to provide for the refunding of the tobacco products   |
| 11 | tax imposed under s. 139.76 (1). If the department enters into an agreement with     |
| 12 | an Indian tribe, the agreement may provide for refunding 100% of that tax on tobacco |
| 13 | products sold on the tribal reservation to enrolled members of the tribe residing on |
| 14 | the tribal reservation and may provide for refunding not more than 50% of that tax   |
| 15 | on tobacco products sold on the tribal reservation to persons who are not enrolled   |
| 16 | members of the tribe residing on the tribal reservation.                             |
| 17 | SECTION 2180. 139.82 (7) of the statutes is created to read:                         |
| 18 | 139.82 (7) The department may inspect the business records of any retailer           |
| 19 | doing business on a reservation or on an Indian tribe's trust land.                  |
| 20 | SECTION 2181. 139.82 (8) of the statutes is created to read:                         |
| 21 | 139.82 (8) Each distributor shall collect and remit the excise tax imposed by        |
| 22 | s. $139.76(1)$ on tobacco products not exempt from the tobacco products tax under s. |
| 23 | 139.76 (2), with the reports required to be filed under this section.                |
| 24 | SECTION 2182. 139.85 (1) of the statutes is amended to read:                         |

| 1  | 139.85 (1) The interest and penalties under s. 139.44 (2) to (7) and (9) to (12)         |
|----|------------------------------------------------------------------------------------------|
| 2  | apply to this subchapter. In addition, a person who violates s. 139.82(8) shall be fined |
| 3  | not less than \$1,000 nor more than \$5,000 or imprisoned for not less than 90 days      |
| 4  | nor more than one year or both.                                                          |
| 5  | SECTION 2216m. 145.245 (4) (a) of the statutes is amended to read:                       |
| 6  | 145.245 (4) (a) The discharge of sewage into a surface water determined to be            |
| 7  | outstanding resource water by the department of natural resources by rule or into        |
| 8  | groundwater.                                                                             |
| 9  | SECTION 2217m. 145.245 (4) (c) of the statutes is amended to read:                       |
| 10 | 145.245 (4) (c) The discharge of sewage to a drain tile or into zones of bedrock         |
| 11 | or a surface water other than a surface water described in par. (a).                     |
| 12 | SECTION 2219m. 145.245 (4m) (a) to (c) of the statutes are amended to read:              |
| 13 | 145.245 (4m) (a) Category 1: failing private sewage systems described in sub.            |
| 14 | (4) (a) to (c).                                                                          |
| 15 | (b) Category 2: failing private sewage systems described in sub. (4) (d) (b) and         |
| 16 | <u>(c)</u> .                                                                             |
| 17 | (c) Category 3: failing private sewage systems described in sub. (4) (e) (d).            |
| 18 | SECTION 2219p. 145.245 (4m) (d) of the statutes is created to read:                      |
| 19 | 145.245 (4m) (d) Category 4: failing private sewage systems described in sub.            |
| 20 | (4) (e).                                                                                 |
| 21 | <b>SECTION 2220.</b> 145.245 (5) (a) 1. of the statutes is amended to read:              |
| 22 | 145.245 (5) (a) 1. A person is eligible for grant funds under this section if he or      |
| 23 | she owns a principal residence which is served by a category 1 or 2 failing private      |
| 24 | sewage system, if the residence was constructed prior to and inhabited on private        |
| 25 | sewage system was installed before July 1, 1978, if the family income of the person      |

does not exceed the income limitations under par. (c), if the amount of the grant determined under sub. (7) is at least \$100, if the residence is not located in an area served by a sewer and if determination of failure is made prior to the rehabilitation or replacement of the failing private sewage system.

SECTION 2221m. 145.245(5)(a) 1. of the statutes, as affected by 1999 Wisconsin Act .... (this act), is amended to read:

145.245 (5) (a) 1. A person is eligible for grant funds under this section if he or she owns a principal residence which is served by a category 1 er, 2 or 3 failing private sewage system, if the sewage system was installed before July 1, 1978, if the family income of the person does not exceed the income limitations under par. (c), if the amount of the grant determined under sub. (7) is at least \$100, if the residence is not located in an area served by a sewer and if determination of failure is made prior to the rehabilitation or replacement of the failing private sewage system.

**SECTION 2222.** 145.245 (5) (a) 2. of the statutes is amended to read:

145.245 (5) (a) 2. A business is eligible for grant funds under this section if it owns a small commercial establishment which is served by a category 1 or 2 failing private sewage system, if the small commercial establishment was constructed prior to private sewage system was installed before July 1, 1978, if the gross revenue of the business does not exceed the limitation under par. (d), if the small commercial establishment is not located in an area served by a sewer and if a determination of failure is made prior to the rehabilitation or replacement of the private sewage system.

SECTION 2223m. 145.245(5)(a) 2. of the statutes, as affected by 1999 Wisconsin Act .... (this act), is amended to read:

145.245 (5) (a) 2. A business is eligible for grant funds under this section if it owns a small commercial establishment which is served by a category 1 er, 2 or 3 failing private sewage system, if the private sewage system was installed before July 1, 1978, if the gross revenue of the business does not exceed the limitation under par. (d), if the small commercial establishment is not located in an area served by a sewer and if a determination of failure is made prior to the rehabilitation or replacement of the private sewage system.

SECTION 2224m. 145.245 (5) (a) 3. of the statutes is amended to read:

145.245 (5) (a) 3. A person who owns a principal residence or small commercial establishment which is served by a category 1 er, 2 or 3 failing private sewage system may submit an application for grant funds during the 3-year period after the determination of failure is made. Grant funds may be awarded after work is completed if rehabilitation or replacement of the system meets all requirements of this section and rules promulgated under this section.

**SECTION 2225.** 145.245 (5) (c) 2. of the statutes is amended to read:

145.245 (5) (c) 2. Except as provided under subd. 4., annual family income shall be based upon the <u>federal</u> adjusted gross income of the owner and the owner's spouse, if any, as computed for Wisconsin income tax purposes for the taxable year prior to the year in which the determination of failure is made. The county median income shall be determined based upon the most recent statistics published by the federal department of housing and urban development for the year prior to the year in which the determination of failure is made.

**SECTION 2226.** 145.245 (5) (c) 3. of the statutes is amended to read:

145.245 (5) (c) 3. In order to be eligible for grant funds under this section, a person shall submit a copy of the designated federal income tax returns for the

taxable year prior to the year in which the determination of failure is upon which the determination of federal adjusted gross income under subd. 2. was made together with any application required by the governmental unit. For taxable year 1985 and earlier, the person shall submit a copy of his or her individual or combined Wisconsin income tax return. For taxable year 1986 and thereafter, the person shall submit a copy of his or her joint Wisconsin income tax return or, if filing separately, his or her separate Wisconsin income tax return and the separate Wisconsin income tax return of his or her spouse, if any.

**SECTION 2227.** 145.245 (5) (c) 4. of the statutes is amended to read:

145.245 (5) (c) 4. A governmental unit may disregard the Wisconsin federal income tax return for the taxable year prior to the year in which the determination of failure is made that is submitted under subd. 3. and may determine annual family income based upon satisfactory evidence of federal adjusted gross income or projected taxable federal adjusted gross income of the owner and the owner's spouse in the current year. The department shall promulgate rules establishing criteria for determining what constitutes satisfactory evidence of federal adjusted gross income or projected federal adjusted gross income in a current year.

SECTION 2228m. 145.245 (5m) (a) of the statutes is amended to read:

145.245 (5m) (a) The department or a governmental unit shall deny a grant application under this section if the applicant or a person who would be directly benefited by the grant intentionally caused the conditions which resulted in a category 1 er, 2 or 3 failing private sewage system. The department or governmental unit shall notify the applicant in writing of a denial, including the reason for the denial.

SECTION 2229. 145.245 (5m) (b) of the statutes is amended to read:

SECTION 2231m. 145.245 (7) (d) of the statutes is amended to read:

145.245 (7) (d) Except as provided in par. (e), if the income of a person who owns a principal residence that is served by a category 1 er, 2 or 3 failing private sewage system is greater than \$32,000, the amount of the grant under this section is limited to the amount determined under par. (c) less 30% of the amount by which the person's income exceeds \$32,000.

SECTION 2236r. 145.245 (11m) (am) of the statutes is created to read:

145.245 (11m) (am) Except as provided in par. (d), if funds are sufficient to fully fund all category 1 and 2 failing private sewage systems but not all category 3 failing private sewage systems, the department shall fully fund all category 1 and 2 systems and prorate the funds for category 3 systems on a proportional basis.

**Section 2237g.** 145.245 (11m) (b) of the statutes is amended to read:

145.245 (11m) (b) Except as provided in par. (d), if funds are sufficient to fully fund all category 1 but not all category 2 failing private sewage systems, the department shall fully fund all category 1 systems and, prorate the funds for category 2 systems on a proportional basis and deny the grant applications for all category 3 systems.

SECTION 2237i. 145.245 (11m) (c) of the statutes is amended to read:

145.245 (11m) (c) Except as provided in par. (d), if funds are not sufficient to fully fund all category 1 failing private sewage systems, the department shall fund the category 1 systems on a proportional basis and deny the grant applications for all category 2 and 3 systems.

SECTION 2238. 145.245 (12m) of the statutes is created to read:

which the department allocates funds under sub. (11) for a fiscal year may apply to the department for a loan under this subsection if the department prorates funds under sub. (11m) for that fiscal year. A governmental unit may only use a loan under this subsection to increase the amounts of grants to persons eligible under sub. (5) above the amounts that would be provided without a loan under this subsection or to provide grants to persons eligible under sub. (5) who would otherwise not receive grants, because of the operation of sub. (11m) (c), but the total amount provided to a person under this section may not exceed the amount authorized under sub (7).

(b) A loan under this subsection bears no interest. A loan under this subsection may not exceed the difference between the amount of the grant that the governmental unit would have received if the department had not prorated grants under sub. (11) and the amount of the grant that the governmental unit did receive. If the amount available for loans under s. 20.320(3)(q) in a fiscal year is not sufficient

- to provide loans to all eligible governmental units applying for loans, the department shall allocate the available funds in the same manner as in sub. (11) (c).
  - (c) A loan approved under this subsection shall be for no longer than 20 years, as determined by the department of administration, and be fully amortized not later than 20 years after the original date of the note.
  - (d) As a condition of receiving a loan under this subsection an applicant shall do all of the following:
  - 1. Pledge the security, if any, required by the department of administration under this subsection.
  - 2. Demonstrate to the satisfaction of the department of administration the financial capacity to assure sufficient revenues to repay the loan.
  - (e) The department of commerce and the department of administration may enter into a financial assistance agreement with a governmental unit that applies for a loan under this subsection and meets the eligibility requirements for a loan, including the requirements under par. (d).
  - (f) The department of administration, in consultation with the department of commerce, may establish those terms and conditions of a financial assistance agreement that relate to its financial management, including what type of municipal obligation is required for the repayment of the financial assistance. In setting the terms and conditions, the department of administration may consider factors that the department of administration finds are relevant, including the type of obligation evidencing the loan, the pledge of security for the obligation and the applicant's creditworthiness.
  - (g) The department of administration shall make and disburse a loan to an applicant that has entered into a financial assistance agreement under par. (e). The

department of administration, in consultation with the department of commerce, shall establish procedures for disbursing loans.

- (h) If a governmental unit fails to make a principal repayment after its due date, the department of administration shall place on file a certified statement of all amounts due under this subsection. After consulting the department of commerce, the department of administration may collect all amounts due by deducting those amounts from any state payments due the governmental unit or may add a special charge to the amount of taxes apportioned to and levied upon the county under s. 70.60. If the department of administration collects amounts due, it shall remit those amounts to the fund to which they are due and notify the department of commerce of that action.
  - Section 2240r. 146.185 of the statutes is created to read:
- 13 146.185 Minority health. (1) In this section:
  - (a) "African American" means a person whose ancestors originated in any of the black racial groups of Africa.
  - (b) "American Indian" means a person who is enrolled as a member of a federally recognized American Indian tribe or band or who possesses documentation of at least one-fourth American Indian ancestry or documentation of tribal recognition as an American Indian.
  - (c) "Asian" means a person whose ancestors originated in Asia south and southeast of the Himalayas and west of Wallace's Line in the Malay Archipelago.
  - (d) "Economically disadvantaged" means having an income that is at or below 125% of the poverty line.

| 1  | (e) "Hispanic" means a person of any race whose ancestors originated in              |
|----|--------------------------------------------------------------------------------------|
| 2  | Mexico, Puerto Rico, Cuba, Central America or South America or whose culture or      |
| 3  | origin is Spanish.                                                                   |
| 4  | (f) "Minority group member" means any of the following:                              |
| 5  | 1. An African American.                                                              |
| 6  | 2. An American Indian.                                                               |
| 7  | 3. A Hispanic.                                                                       |
| 8  | 4. An Asian.                                                                         |
| 9  | (g) "Nonprofit corporation" means a nonstock corporation organized under ch.         |
| 10 | 181 that is a nonprofit corporation, as defined in s. 181.0103 (17).                 |
| 11 | (h) "Poverty line" means the nonfarm federal poverty line for the continental        |
| 12 | United States, as defined by the federal department of labor under 42 USC 9902 (2).  |
| 13 | (i) "State agency" has the meaning given in s. 16.70 (1).                            |
| 14 | (2) The department shall do all of the following:                                    |
| 15 | (a) Identify the barriers to health care that prevent economically                   |
| 16 | disadvantaged minority group members in this state from participating fully and      |
| 17 | equally in all aspects of life.                                                      |
| 18 | (b) Conduct statewide hearings on issues of concern to the health interests of       |
| 19 | economically disadvantaged minority group members.                                   |
| 20 | (c) Review, monitor and advise all state agencies with respect to the impact on      |
| 21 | the health of economically disadvantaged minority group members of current and       |
| 22 | emerging state policies, procedures, practices, statutes and rules.                  |
| 23 | (d) Work closely with all state agencies, including the board of regents of the      |
| 24 | University of Wisconsin System and the technical college system board, with the      |
| 25 | University of Wisconsin Hospitals and Clinics Authority, with the private sector and |

- with groups concerned with issues of the health of economically disadvantaged minority group members to develop long-term solutions to health problems of minority group members.
  - (e) Disseminate information on the status of the health of economically disadvantaged minority group members in this state.
  - (f) Encourage economically disadvantaged minority group members who are students to enter career health care professions, by developing materials that are culturally sensitive and appropriate and that promote health care professions as careers, for use by the University of Wisconsin System, the technical college system and the Medical College of Wisconsin in recruiting the students.
  - (g) Submit a biennial report on the activities of the department under this section that includes recommendations on program policies, procedures, practices and services affecting the health status of economically disadvantaged minority group members, to the appropriate standing committees under s. 13.172 (3) and to the governor.
  - (3) From the appropriation under s. 20.435 (5) (fh), the department shall award grants for activities to improve the health status of economically disadvantaged minority group members. A person may apply, in the manner specified by the department, for a grant of up to \$50,000 in each fiscal year to conduct these activities. A grant awarded under this subsection may not exceed 50% of the cost of the activities. An applicant's required contribution for a grant may consist of funding or an in-kind contribution.
  - (4) From the appropriation under s. 20.435(5)(fh), the department shall award a grant of up to \$100,000 in each fiscal year to a private nonprofit corporation that

applies, in the manner specified by the department, to conduct a public information campaign on minority health.

SECTION 2241. 146.19 (2) (intro.) of the statutes is amended to read:

the appropriation under s. 20.435 (5) (ek) (ke), the department shall award grants for cooperative American Indian health projects in order to promote cooperation among tribes, tribal agencies, inter-tribal organizations and other agencies and organizations in addressing specific problem areas in the field of American Indian health. A tribe, tribal agency or inter-tribal organization may apply, in the manner specified by the department, for a grant of up to \$10,000 to conduct a cooperative American Indian health project, which meets all of the following requirements:

SECTION 2241c. 146.19 (2m) of the statutes is created to read:

146.19 (2m) Grants to tribal health centers. Subject to 1999 Wisconsin Act .... (this act), section 9123 (6tu), from the appropriation under s. 20.435 (5) (ke), the department shall award grants for the provision or purchase of health care services for tribal members and their families to tribal health care entities that provide primary health care, health education and social services to tribal members and their families and to tribal employes. The department shall establish by rule criteria for distributing grants to the health care entities. In developing the criteria, the department shall consider each tribe's financial need, resources available to each tribe and other demographic health status indicators.

SECTION 2249m. 146.40 (4d) (a) of the statutes is amended to read:

146.40 (4d) (a) The Except as provided in par. (am), the department shall require each applicant to provide the department with his or her social security number, if the applicant is an individual, or the applicant's federal employer

| 1 | identification number, if the applicant is not an individual, as a condition of issuing |
|---|-----------------------------------------------------------------------------------------|
| 2 | a certification under sub. (3) or an approval under sub. (3m).                          |
| 3 | SECTION 2249mi. 146.40 (4d) (am) of the statutes is created to read:                    |

146.40 (4d) (am) If an individual who applies for a certification or approval under par. (a) does not have a social security number, the individual, as a condition of obtaining certification or approval, shall submit a statement made or subscribed under oath or affirmation to the department that the applicant does not have a social security number. The form of the statement shall be prescribed by the department of workforce development. A certification or approval issued in reliance upon a false statement submitted under this paragraph is invalid.

SECTION 2249n. 146.40 (4d) (c) of the statutes is amended to read:

146.40 (4d) (c) The Except as provided in par. (am), the department shall deny an application for the issuance of a certification or approval specified in par. (a) if the applicant does not provide the information specified in par. (a).

SECTION 2249p. 146.51 (1) (intro.) of the statutes is amended to read:

146.51 (1) (intro.) The Except as provided in sub. (1m), the department shall require each applicant to provide the department with the applicant's social security number, if the applicant is an individual, as a condition of issuing or renewing any of the following:

SECTION 2249q. 146.51 (1m) of the statutes is created to read:

146.51 (1m) If an individual who applies for or to renew a license, training permit or certification under sub. (1) does not have a social security number, the individual, as a condition of obtaining the license, training permit or certification, shall submit a statement made or subscribed under oath or affirmation to the department that the applicant does not have a social security number. The form of

| 1  | the statement shall be prescribed by the department of workforce development. A            |
|----|--------------------------------------------------------------------------------------------|
| 2  | license, training permit or certification issued or renewed in reliance upon a false       |
| 3  | statement submitted under this subsection is invalid.                                      |
| 4  | SECTION 2249r. 146.52 (1) (intro.) of the statutes is amended to read:                     |
| 5  | 146.52 (1) (intro.) The Except as provided in sub. (1m), the department shall              |
| 6  | require each applicant to provide the department with his or her social security           |
| 7  | number, if the applicant is an individual, or the applicant's federal employer             |
| 8  | identification number, if the applicant is not an individual, as a condition of issuing    |
| 9  | or renewing any of the following:                                                          |
| 10 | SECTION 2249s. 146.52 (1m) of the statutes is created to read:                             |
| 11 | 146.52 (1m) If an individual who applies for or to renew a license, training               |
| 12 | permit or certificate under sub. (1) does not have a social security number, the           |
| 13 | individual, as a condition of obtaining the license, training permit or certificate, shall |
| 14 | submit a statement made or subscribed under oath or affirmation to the department          |
| 15 | that the applicant does not have a social security number. The form of the statement       |
| 16 | shall be prescribed by the department of workforce development. A license, training        |
| 17 | permit or certificate issued or renewed in reliance upon a false statement submitted       |
| 18 | under this subsection is invalid.                                                          |
| 19 | SECTION 2249t. 146.52 (3) of the statutes is amended to read:                              |
| 20 | 146.52 (3) The Except as provided in sub. (1m), the department shall deny an               |
| 21 | application for the issuance or renewal of a license, certificate or permit specified in   |
| 22 | sub. (1) if the applicant does not provide the information specified in sub. (1).          |
| 23 | SECTION 2251. 146.56 (1) of the statutes is amended to read:                               |
| 24 | 146.56 (1) Not later than July 1, $2001$ $2002$ , the department shall develop and         |
| 25 | implement a statewide trauma care system. The department shall seek the advice             |

| 1  | of the statewide trauma advisory council under s. 15.197 (25) in developing and       |
|----|---------------------------------------------------------------------------------------|
| 2  | implementing the system.                                                              |
| 3  | SECTION 2251d. 146.57 (title) of the statutes is amended to read:                     |
| 4  | 146.57 (title) Statewide poison control program system.                               |
| 5  | SECTION 2251e. 146.57 (1m) of the statutes is created to read:                        |
| 6  | 146.57 (1m) Definitions. In this section:                                             |
| 7  | (a) "Appropriate health-oriented background" means one of the following:              |
| 8  | 1. Licensure as an emergency medical technician — basic, emergency medical            |
| 9  | technician — intermediate or emergency medical technician — paramedic under s.        |
| 10 | 146.50 (5) (a).                                                                       |
| 11 | 2. Licensure as a licensed practical nurse under s. 441.10 (3).                       |
| 12 | 3. Completion of a training program directed by a physician specializing in           |
| 13 | toxicology and, as determined by the medical director of a poison control center,     |
| 14 | background sufficient to understand and interpret standard poison information         |
| 15 | resources and to transmit that information understandably to both health              |
| 16 | professionals and the public under the direct supervision of a staff member specified |
| 17 | under sub. (3m) (b) 1. to 7. or the medical director.                                 |
| 18 | (b) "On-line staff member" means a member of the staff of a poison control            |
| 19 | center who personally responds to telephone inquiries received by the poison control  |
| 20 | center.                                                                               |
| 21 | (c) "Pharmacist" has the meaning given in s. 450.01 (15).                             |
| 22 | (d) "Physician" has the meaning given in s. 448.01 (5).                               |
| 23 | (e) "Poison control services" means poison prevention education, and rapid and        |
| 24 | accurate poison interpretation, poison intervention and management information.       |
| 25 | (f) "Registered nurse" means a nurse who is licensed under s. 441.06.                 |

| 1  | (g) "School of pharmacy" means a school of pharmacy that is accredited by the             |
|----|-------------------------------------------------------------------------------------------|
| 2  | American Council on Pharmaceutical Education.                                             |
| 3  | SECTION 2251f. 146.57 (3) (a) of the statutes is amended to read:                         |
| 4  | 146.57 (3) (a) The department shall implement a statewide poison control                  |
| 5  | program system, which shall provide poison control services that are available            |
| 6  | statewide, on a 24-hour per day and 365-day per year basis and shall provide poison       |
| 7  | information and education to health care professionals and the public. From the           |
| 8  | appropriation under s. 20.435 (5) (ds), the department shall, if the requirement          |
| 9  | under par. (b) is met, distribute total funding of not more than \$375,000 in each fiscal |
| 10 | year to supplement the operation of the program system and to provide for the             |
| 11 | statewide collection and reporting of poison control data. The department may, but        |
| 12 | need not, distribute all of the funds in each fiscal year to a single poison control      |
| 13 | center.                                                                                   |
| 14 | SECTION 2251g. 146.57 (3m) of the statutes is created to read:                            |
| 15 | 146.57 (3m) REQUIREMENTS OF POISON CONTROL CENTERS. (a) A poison control                  |
| 16 | center shall maintain telephone services capable of providing rapid, accurate and         |
| 17 | complete poison information that is accessible throughout the state and that is free      |
| 18 | to users through a statewide toll-free hotline.                                           |
| 19 | (b) An on-line staff member who interprets poison exposure data and provides              |
| 20 | poison intervention and management information shall be one of the following:             |
| 21 | 1. A registered nurse.                                                                    |
| 22 | 2. A pharmacist.                                                                          |
| 23 | 3. A physician.                                                                           |
| 24 | 4. A person who is certified by or eligible for certification by the American             |
| 25 | Association of Poison Control Centers as a specialist in poison information.              |

| 1  | 5. A school of pharmacy graduate who is in residency training.                            |
|----|-------------------------------------------------------------------------------------------|
| 2  | 6. A school of pharmacy enrollee who has completed the 2nd professional                   |
| 3  | practice year.                                                                            |
| 4  | 7. A person who was employed as an on-line staff member on May 1, 1994, who               |
| 5  | has worked in that capacity at the poison control center for at least 3 years and who     |
| 6  | annually receives at least 16 documented hours of continuing education in                 |
| 7  | interpreting poison exposure data and providing poison intervention and                   |
| 8  | management information.                                                                   |
| 9  | 8. A person who is designated as a poison information provider, annually                  |
| 10 | receives at least 16 documented hours of job-relevant continuing education and has        |
| 11 | an appropriate health-oriented background.                                                |
| 12 | <b>SECTION 2252gm.</b> 146.819 (4) (e) of the statutes is repealed.                       |
| 13 | SECTION 2251r. 146.84 (3) of the statutes is amended to read:                             |
| 14 | 146.84 (3) DISCIPLINE OF EMPLOYES. Any person employed by the state, or any               |
| 15 | political subdivision of the state who violates s. 146.82 or 146.83, except a health care |
| 16 | provider that negligently violates s. 153.50 (6) (c), may be discharged or suspended      |
| 17 | without pay.                                                                              |
| 18 | SECTION 2252m. 146.81 (1) (eq) of the statutes is created to read:                        |
| 19 | 146.81 (1) (eq) An athletic trainer licensed under subth. VI of th. 448.                  |
| 20 | SECTION 2254. 146.93 (1) (a) of the statutes is amended to read:                          |
| 21 | 146.93 (1) (a) From the appropriation under s. 20.435 (1) (4) (gp), the                   |
| 22 | department shall maintain a program for the provision of primary health care              |
| 23 | services based on the primary health care program in existence on June 30, 1987.          |
| 24 | The department may promulgate rules necessary to implement the program.                   |
| 25 | SECTION 2255. 146.99 of the statutes is amended to read:                                  |

| 146.99 Assessments. The department shall, within 90 days after the                        |
|-------------------------------------------------------------------------------------------|
| commencement of each fiscal year, estimate the total amount of expenditures and the       |
| department shall assess the estimated total amount under s. 20.435 (1) (gp) to            |
| hospitals, as defined in s. 50.33 (2), a total of \$1,500,000, in proportion to each      |
| hospital's respective gross private-pay patient revenues during the hospital's most       |
| recently concluded entire fiscal year. Each hospital shall pay its assessment on or       |
| before December 1 for the fiscal year. All payments of assessments shall be deposited     |
| in the appropriation under s. $20.435 (1) (4) (gp)$ .                                     |
| SECTION 2255m. 149.10 (3e) of the statutes is created to read:                            |
| 149.10 (3e) "Fund" means the health insurance risk-sharing plan fund.                     |
| <b>SECTION 2256.</b> 149.12 (2) (d) of the statutes is renumbered 149.12 (2) (d) 1. and   |
| amended to read:                                                                          |
| 149.12 (2) (d) 1. Except for a person who is an eligible individual as provided           |
| in subd. 2., no person who is 65 years of age or older is eligible for coverage under the |
| plan.                                                                                     |
| <b>SECTION 2257.</b> 149.12 (2) (d) 2. of the statutes is created to read:                |
| 149.12 (2) (d) 2. Subdivision 1. does not apply to any of the following:                  |
| a. A person who is an eligible individual.                                                |
| b. A person who has coverage under the plan on the date on which he or she                |
| attains the age of 65 years.                                                              |
| SECTION 2258. 149.12 (3) (b) of the statutes is amended to read:                          |
| 149.12 (3) (b) Persons for whom deductible or coinsurance amounts are paid                |
| or reimbursed under ch. 47 for vocational rehabilitation, under s. 49.68 for renal        |
| disease, under s. 49.685 (8) for hemophilia, under s. 49.683 for cystic fibrosis ex.      |
| under s. 253.05 for maternal and child health services or under s. 49.686 for the cost    |

of drugs for the treatment of HIV infection or AIDS are not ineligible for coverage under the plan by reason of such payments or reimbursements.

SECTION 2258d. 149.125 of the statutes is repealed.

SECTION 2258f. 149.14 (2) (a) of the statutes is amended to read:

149.14 (2) (a) The plan shall provide every eligible person who is not eligible for medicare with major medical expense coverage. Major medical expense coverage offered under the plan under this section shall pay an eligible person's covered expenses, subject to sub. (3) and deductible, copayment and coinsurance payments authorized under sub. (5), up to a lifetime limit of \$1,000,000 per covered individual. The maximum limit under this paragraph shall not be altered by the board, and no actuarially equivalent benefit may be substituted by the board.

SECTION 2259. 149.14 (3) (intro.) of the statutes is amended to read:

as restricted by cost containment provisions under s. 149.17 (4) and except as reduced by the board under s. 149.15 (3) (e) or by the department under s. ss. 149.143 or and 149.144, covered expenses for the coverage under this section shall be the usual and customary charges payment rates established by the department under s. 149.142 for the services provided by persons licensed under ch. 446 and certified under s. 49.45 (2) (a) 11. Except as provided in sub. (4), except as restricted by cost containment provisions under s. 149.17 (4) and except as reduced by the board under s. 149.15 (3) (e) or by the department under s. ss. 149.143 or and 149.144, covered expenses for the coverage under this section shall also be the usual and customary charges payment rates established by the department under s. 149.142 for the following services and articles if the service or article is prescribed by a physician who is licensed under ch. 448 or in another state and who is certified under s. 49.45

| 1  | (2) (a) 11. and if the service or article is provided by a provider certified under s. 49.45 |
|----|----------------------------------------------------------------------------------------------|
| 2  | (2) (a) 11.:                                                                                 |
| 3  | SECTION 2259f. 149.14 (3) (d) of the statutes is amended to read:                            |
| 4  | 149.14 (3) (d) Drugs requiring a physician's prescription, subject to sub. (4c).             |
| 5  | SECTION 2259r. 149.14 (4) (d) of the statutes is amended to read:                            |
| 6  | 149.14 (4) (d) That part of any charge for services or articles rendered or                  |
| 7  | prescribed by a physician, dentist or other health care personnel which that exceeds         |
| 8  | the prevailing charge in the locality where the service is provided payment rate             |
| 9  | established by the department under s. 149.142 and reduced under ss. 149.143 and             |
| 10 | 149.144 or any charge not medically necessary.                                               |
| 11 | SECTION 2260. 149.14 (4) (g) of the statutes is amended to read:                             |
| 12 | 149.14 (4) (g) Dental care except as provided in sub. (3) (m) and (q).                       |
| 13 | SECTION 2260c. 149.14 (4) (n) of the statutes is created to read:                            |
| 14 | 149.14 (4) (n) Services or drugs for the treatment of infertility, impotence or              |
| 15 | sterility.                                                                                   |
| 16 | SECTION 2260d. 149.14 (4c) of the statutes is created to read:                               |
| 17 | 149.14 (4c) COVERAGE OF PRESCRIPTION DRUGS. (a) The department may require                   |
| 18 | a pharmacist or pharmacy that provides a prescription drug to an eligible person to          |
| 19 | submit a payment claim directly to the plan administrator.                                   |
| 20 | (b) The department may limit coverage of prescription drugs under sub. (3) (d)               |
| 21 | to those prescription drugs for which payment claims are submitted by pharmacists            |
| 22 | or pharmacies directly to the plan administrator.                                            |
| 23 | SECTION 2260h. 149.14 (4m) of the statutes is amended to read:                               |
| 24 | 149.14 (4m) PAYMENT IS PAYMENT IN FULL. Except for copayments, coinsurance                   |
| 25 | or deductibles required or authorized under the plan, a provider of a covered service        |

| or article shall accept as payment in full for the covered service or article the payment      |
|------------------------------------------------------------------------------------------------|
| rate determined under ss. 149.142, 149.143, and 149.144 and 149.15 (3) (e) and may             |
| not bill an eligible person who receives the service or article for any amount by which        |
| the charge for the service or article is reduced under s. <u>149.142</u> , 149.143, or 149.144 |
| o <del>r 149.15 (3) (e)</del> .                                                                |
| SECTION 2260m. 149.14 (5) (title) of the statutes is amended to read:                          |
| 149.14 (5) (title) Deductibles, copayments and coinsurance.                                    |
| <b>Section 2260p.</b> 149.14 (5) (e) of the statutes is created to read:                       |
| 149.14 (5) (e) Subject to sub. (8) (b), the department may, by rule under s. 149.17            |
| (4), establish copayments for prescription drug coverage under sub. (3) (d). Any               |
| copayment amounts or rates established are subject to the approval of the board.               |
| Copayments paid by an eligible person under this paragraph shall count toward the              |
| deductible and covered costs not paid by the plan under pars. (a) to (c).                      |
| SECTION 2261. 149.14 (6) (title) of the statutes is created to read:                           |
| 149.14 (6) (title) Preexisting conditions.                                                     |
| SECTION 2261f. 149.14 (8) of the statutes is created to read:                                  |
| 149.14 (8) Applicability of medical assistance provisions. (a) Except as                       |
| provided in par. (b), the department may, by rule under s. $149.17(4)$ , apply to the plan     |
| the same utilization and cost control procedures that apply under rules promulgated            |
| by the department to medical assistance under subch. IV of ch. 49.                             |
| (b) The department may not apply to eligible persons for covered services or                   |
| articles the same copayments that apply to recipients of medical assistance under              |
| subch. IV of ch. 49 for services or articles covered under that program.                       |
| SECTION 2261j. 149.142 of the statutes is created to read:                                     |

| 149.142 Provider payment rates. (1) (a) Except as provided in par. (b), the           |
|---------------------------------------------------------------------------------------|
| department shall establish payment rates for covered expenses that consist of the     |
| allowable charges paid under s. 49.46 (2) for the services and articles provided plus |
| an enhancement determined by the department. The rates shall be based on the          |
| allowable charges paid under s. 49.46 (2), projected plan costs and trend factors.    |
| Using the same methodology that applies to medical assistance under subch. IV of      |
| ch. 49, the department shall establish hospital outpatient per visit reimbursement    |
| rates and hospital inpatient reimbursement rates that are specific to diagnostically  |
| related groups of eligible persons.                                                   |
| (b) The payment rate for a prescription drug shall be the allowable charge paid       |
| under s. 49.46 (2) (b) 6. h. for the prescription drug.                               |
| (2) The rates established under this section are subject to adjustment under          |
| ss. 149.143 and 149.144.                                                              |
| SECTION 2261m. 149.143 (1) (intro.) of the statutes is amended to read:               |
| 149.143 (1) (intro.) The department shall pay or recover the operating costs of       |
| the plan from the appropriation under s. 20.435 (4) (v) and administrative costs of   |
| the plan from the appropriation under s. 20.435 (4) (u). For purposes of determining  |
| premiums, insurer assessments and provider payment rate adjustments, the              |
| department shall apportion and prioritize responsibility for payment or recovery of   |
| plan costs from among the moneys constituting the fund as follows:                    |
| SECTION 2262b. 149.143 (1) (a) of the statutes is amended to read:                    |
| 149.143 (1) (a) First from the moneys transferred to the fund from the                |
| appropriation account under s. $20.435 \frac{(5)}{(4)} (af)$ .                        |
| <b>SECTION 2263b.</b> 149.143 (1) (b) 1. a. of the statutes is amended to read:       |

| 149.143 (1) (b) 1. a. First, from premiums from eligible persons with coverage                     |
|----------------------------------------------------------------------------------------------------|
| under s. 149.14 set at 150% of the rate that a standard risk would be charged under                |
| an individual policy providing substantially the same coverage and deductibles as                  |
| are provided under the plan, including amounts received for premium and deductible                 |
| subsidies under s. 149.144 and under the transfer to the fund from the appropriation               |
| account under ss. s. 20.435 (5) (4) (ah) and 149.144, and from premiums collected                  |
| from eligible persons with coverage under s. 149.146 set in accordance with s.                     |
| 149.146 (2) (b).                                                                                   |
| <b>Section 2263bm.</b> 149.143 (1) (b) 1. b. of the statutes is amended to read:                   |
| 149.143 (1) (b) 1. b. Second, from the appropriation under s. 20.435 (5) (gh)                      |
| moneys specified under sub. (2m), to the extent that the amounts under subd. 1. a.                 |
| are insufficient to pay 60% of plan costs.                                                         |
| <b>SECTION 2263bn.</b> 149.143 (1) (b) 1. c. of the statutes is amended to read:                   |
| 149.143 (1) (b) 1. c. Third, by increasing premiums from eligible persons with                     |
| coverage under s. 149.14 to more than 150% but not more than 200% of the rate that                 |
| a standard risk would be charged under an individual policy providing substantially                |
| the same coverage and deductibles as are provided under the plan, including                        |
| amounts received for premium and deductible subsidies under s. 149.144 and under                   |
| the transfer to the fund from the appropriation account under ss. s. $20.435 \frac{(5)}{(4)}$ (ah) |
| and 149.144, and by increasing premiums from eligible persons with coverage under                  |
| s. 149.146 in accordance with s. 149.146 (2) (b), to the extent that the amounts under             |
| subd. 1. a. and b. are insufficient to pay 60% of plan costs.                                      |
| <b>SECTION 2263bp.</b> 149.143 (1) (b) 1. d. of the statutes is amended to read:                   |
| 149.143 (1) (b) 1. d. Fourth, notwithstanding subd. 2., by increasing insurer                      |

assessments, excluding assessments under s. 149.144, and adjusting provider

| 1  | payment rates, excluding adjustments to those rates under ss. s. 149.144 and 149.15                                           |
|----|-------------------------------------------------------------------------------------------------------------------------------|
| 2  | (3) (e), in equal proportions and to the extent that the amounts under subd. 1. a. to                                         |
| 3  | c. are insufficient to pay 60% of plan costs.                                                                                 |
| 4  | <b>SECTION 2264e.</b> 149.143 (1) (b) 2. b. of the statutes is amended to read:                                               |
| 5  | 149.143 (1) (b) 2. b. Fifty percent from adjustments to provider payment rates,                                               |
| 6  | excluding adjustments to those rates under ss. s. 149.144 and 149.15 (3) (e).                                                 |
| 7  | <b>SECTION 2265b.</b> 149.143 (2) (a) 1. a. of the statutes is amended to read:                                               |
| 8  | 149.143 (2) (a) 1. a. Estimate the amount of enrollee premiums that would be                                                  |
| 9  | received in the new plan year if the enrollee premiums were set at a level sufficient,                                        |
| 10 | when including amounts received for premium and deductible subsidies under s.                                                 |
| 11 | 149.144 and under the transfer to the fund from the appropriation account under ss.                                           |
| 12 | $\underline{s}$ 20.435 $\underline{(5)}$ $\underline{(4)}$ (ah) and 149.144 and from premiums collected from eligible persons |
| 13 | with coverage under s. $149.146$ set in accordance with s. $149.146$ (2) (b), to cover $60\%$                                 |
| 14 | of the estimated plan costs for the new plan year, after deducting from the estimated                                         |
| 15 | plan costs the amount available in for transfer to the fund from the appropriation                                            |
| 16 | account under s. $20.435 \frac{(5)}{(4)}$ (af) for that plan year.                                                            |
| 17 | <b>SECTION 2265bm.</b> 149.143 (2) (a) 1. c. of the statutes is repealed.                                                     |
| 18 | SECTION 2266g. 149.143 (2m) of the statutes is created to read:                                                               |
| 19 | 149.143 (2m) (a) The department shall keep a separate accounting of the                                                       |
| 20 | difference between the following:                                                                                             |
| 21 | 1. The amount of premiums received in a plan year from all eligible persons,                                                  |
| 22 | including amounts received for premium and deductible subsidies.                                                              |
| 23 | 2. The amount of premiums, including amounts received for premium and                                                         |
| 24 | deductible subsidies, necessary to cover 60% of the plan costs for the plan year, after                                       |

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| 1  | deducting the amount transferred to the fund from the appropriation account under       |
|----|-----------------------------------------------------------------------------------------|
| 2  | s. 20.435 (4) (af).                                                                     |
| 3  | (b) Any amount by which the amount under par. (a) 1. exceeds the amount                 |
| 4  | under par. (a) 2. may be used only as follows:                                          |
| 5  | 1. To reduce premiums in succeeding plan years as provided in sub. (1) (b) 1.           |
| 6  | b. For eligible persons with coverage under s. 149.14, premiums may not be reduced      |
| 7  | below 150% of the rate that a standard risk would be charged under an individual        |
| 8  | policy providing substantially the same coverage and deductibles as are provided        |
| 9  | under the plan.                                                                         |
| 10 | 2. For other needs of eligible persons, with the approval of the board.                 |
| 11 | <b>SECTION 2267j.</b> 149.143 (3) (b) of the statutes is amended to read:               |
| 12 | 149.143 (3) (b) If, after increasing the department increases premium rates             |
| 13 | and insurer assessments and adjusting adjusts the provider payment rate under par.      |
| 14 | (a), the department and determines that there will still be a deficit and that premium  |
| 15 | rates have been increased to the maximum extent allowable under par. (a), the           |
| 16 | department shall may further adjust, in equal proportions, assessments set under        |
| 17 | sub. (2) (a) 3. and the provider payment rate set under sub. (2) (a) 4., without regard |
| 18 | to sub. (1) (b) 2.                                                                      |
| 19 | SECTION 2267m. 149.143 (5) of the statutes is created to read:                          |
| 20 | 149.143 (5) (a) Annually, no later than April 30, the department shall perform          |
| 21 | a reconciliation with respect to plan costs, premiums, insurer assessments and          |

provider payment rate adjustments based on data from the previous calendar year.

On the basis of the reconciliation, the department shall make any necessary

adjustments in premiums, insurer assessments or provider payment rates for the

- fiscal year beginning on the first July 1 after the reconciliation, as provided in sub.

  (2) (b).
  - (b) Except as provided in sub. (3) and s. 149.144, the department shall adjust the provider payment rates to meet the providers' specified portion of the plan costs no more than once annually. The department may not determine the adjustment on an individual provider basis or on the basis of provider type, but shall determine the adjustment for all providers in the aggregate.

SECTION 2267r. 149.144 of the statutes is amended to read:

rates for premium and deductible reductions. If the moneys transferred to the fund under the appropriation under s. 20.435 (5)(4)(ah) are insufficient to reimburse the plan for premium reductions under s. 149.165 and deductible reductions under s. 149.14 (5) (a), or the department determines that the moneys transferred or to be transferred to the fund under the appropriation under s. 20.435 (5) (4) (ah) will be insufficient to reimburse the plan for premium reductions under s. 149.165 and deductible reductions under s. 149.14 (5) (a), the department shall may, by rule, adjust in equal proportions the amount of the assessment set under s. 149.143 (2) (a) 3. and the provider payment rate set under s. 149.143 (2) (a) 4., subject to s. 149.143 (1) (b) 1., sufficient to reimburse the plan for premium reductions under s. 149.165 and deductible reductions under s. 149.14 (5) (a). The If the department makes the adjustment under this section, the department shall notify the commissioner so that the commissioner may levy any increase in insurer assessments.

SECTION 2268m. 149.145 of the statutes is amended to read:

149.145 Program budget. The department, in consultation with the board, shall establish a program budget for each plan year. The program budget shall be

| based on the provider payment rates specified in s. 149.15 (3) (e) 149.142 and in the  |
|----------------------------------------------------------------------------------------|
| most recent provider contracts that are in effect and on the funding sources specified |
| in s. 149.143 (1), including the methodologies specified in ss. 149.143, 149.144 and   |
| 149.146 for determining premium rates, insurer assessments and provider payment        |
| rates. Except as otherwise provided in s. 149.143 (3) (a) and (b), from the program    |
| budget the department shall derive the actual provider payment rate for a plan year    |
| that reflects the providers' proportional share of the plan costs, consistent with ss. |
| 149.143 and 149.144. The department may not implement a program budget                 |
| established under this section unless it is approved by the board.                     |

**SECTION 2269.** 149.146 (1) (a) of the statutes is amended to read:

149.146 (1) (a) Beginning on January 1, 1998, in addition to the coverage required under s. 149.14, the plan shall offer to all eligible persons who are not eligible for medicare a choice of coverage, as described in section 2744 (a) (1) (C), P.L. 104–191. Any such choice of coverage shall be major medical expense coverage.

**SECTION 2270.** 149.146 (1) (b) 2. of the statutes is amended to read:

149.146 (1) (b) 2. An eligible person <u>under par. (a)</u> may elect once each year, at the time and according to procedures established by the department, among the coverages offered under this section and s. 149.14. If an eligible person elects new coverage, any preexisting condition exclusion imposed under the new coverage is met to the extent that the eligible person has been previously and continuously covered under this chapter. No preexisting condition exclusion may be imposed on an eligible person who elects new coverage if the person was an eligible individual when first covered under this chapter and the person remained continuously covered under this chapter up to the time of electing the new coverage.

**SECTION 2271.** 149.146 (2) (am) of the statutes is created to read:

| 1  | 149.146 (2) (am) 1. For all eligible persons with coverage under this section,               |
|----|----------------------------------------------------------------------------------------------|
| 2  | the deductible shall be \$2,500. Expenses used to satisfy the deductible during the          |
| 3  | last 90 days of a calendar year shall also be applied to satisfy the deductible for the      |
| 4  | following calendar year.                                                                     |
| 5  | 2. Except as provided in subd. 3., if the covered costs incurred by the eligible             |
| 6  | person exceed the deductible for major medical expense coverage in a calendar year,          |
| 7  | the plan shall pay at least 80% of any additional covered costs incurred by the person       |
| 8  | during the calendar year.                                                                    |
| 9  | 3. If the aggregate of the covered costs not paid by the plan under subd. 2. and             |
| 10 | the deductible exceeds $\$3,500$ for any eligible person during a calendar year or $\$7,000$ |
| 11 | for all eligible persons in a family, the plan shall pay 100% of all covered costs           |
| 12 | incurred by the eligible person during the calendar year after the payment ceilings          |
| 13 | under this subdivision are exceeded.                                                         |
| 14 | 4. Notwithstanding subds. 1. to 3., the department may establish different                   |
| 15 | deductible amounts, a different coinsurance percentage and different covered costs           |
| 16 | and deductible aggregate amounts from those specified in subds. 1. to 3. in                  |
| 17 | accordance with cost containment provisions established by the department under              |
| 18 | s. 149.17 (4).                                                                               |
| 19 | <b>SECTION 2276m.</b> 149.15 (3) (e) of the statutes is repealed.                            |
| 20 | SECTION 2277c. 149.15 (3) (g) of the statutes is created to read:                            |
| 21 | 149.15 (3) (g) Establish oversight committees to address various                             |
| 22 | administrative issues, such as financial management of the plan and plan                     |
| 23 | administrator performance standards. A representative of the department may not              |

be the chairperson of any committee established under this paragraph.

SECTION 2277d. 149.16 (4) of the statutes is created to read:

| 1  | 149.16 (4) The plan administrator shall account for costs related to the plan           |
|----|-----------------------------------------------------------------------------------------|
| 2  | separately from costs related to medical assistance under subch. IV of ch. 49.          |
| 3  | SECTION 2277f. 149.16 (5) of the statutes is created to read:                           |
| 4  | 149.16 (5) The department shall obtain the approval of the board before                 |
| 5  | implementing any contract with the plan administrator.                                  |
| 6  | SECTION 2277m. 149.165 (2) (intro.) of the statutes is amended to read:                 |
| 7  | 149.165 (2) (intro.) If Subject to sub. (3m), if the household income, as defined       |
| 8  | in s. 71.52 (5) and as determined under sub. (3), of an eligible person is equal to or  |
| 9  | greater than the first amount and less than the 2nd amount listed in any of the         |
| 10 | following, the department shall reduce the premium for the eligible person to the rate  |
| 11 | shown after the amounts:                                                                |
| 12 | SECTION 2277p. 149.165 (2) (e) of the statutes is created to read:                      |
| 13 | 149.165 (2) (e) If equal to or greater than \$20,000 and less than \$25,000, to         |
| 14 | 130% of the rate that a standard risk would be charged under an individual policy       |
| 15 | providing substantially the same coverage and deductibles as provided under the         |
| 16 | plan.                                                                                   |
| 17 | SECTION 2277t. 149.165 (3m) of the statutes is created to read:                         |
| 18 | 149.165 (3m) Upon request of the board, the joint committee on finance may              |
| 19 | approve or disapprove adjustment, by the board or the department, of the household      |
| 20 | income dollar amounts listed in sub. (2) (a) to (e), except for the first dollar amount |
| 21 | listed in sub. (2) (a), to reflect changes in the consumer price index for all urban    |
| 22 | consumers, U.S. city average, as determined by the U.S. department of labor. With       |
| 23 | any request for approval of adjustment under this subsection, the board shall submit    |
| 24 | to the joint committee on finance the proposed adjusted amounts.                        |
| 25 | SECTION 2278b. 149.165 (4) of the statutes is amended to read:                          |

| 1  | 149.165 (4) The department shall reimburse the plan for premium reductions                                   |
|----|--------------------------------------------------------------------------------------------------------------|
| 2  | under sub. (2) and deductible reductions under s. 149.14 (5) (a) with moneys                                 |
| 3  | <u>transferred to the fund</u> from the appropriation <u>account</u> under s. $20.435 \frac{(5)}{(4)}$ (ah). |
| 4  | Section 2278c. 149.17 (2) of the statutes is amended to read:                                                |
| 5  | 149.17 (2) A schedule of premiums, deductibles, copayments and coinsurance                                   |
| 6  | payments which that complies with all requirements of this chapter.                                          |
| 7  | SECTION 2278g. 149.17 (4) of the statutes is amended to read:                                                |
| 8  | 149.17 (4) Cost containment provisions established by the department by rule,                                |
| 9  | including managed care requirements. The department shall obtain the approval of                             |
| 10 | the board before promulgating a rule that establishes a cost containment provision                           |
| 11 | that would have an effect on an eligible person's access to health care services, such                       |
| 12 | as the creation of new prior authorization requirements.                                                     |
| 13 | SECTION 2278r. 150.46 (3) of the statutes is created to read:                                                |
| 14 | 150.46 (3) This subchapter does not apply to the nursing care facility operated                              |
| 15 | by the department of veterans affairs under s. 45.385.                                                       |
| 16 | SECTION 2278rm. 150.84 (2) of the statutes is amended to read:                                               |
| 17 | 150.84 (2) "Health care facility" means a facility, as defined in s. 647.01 (4), or                          |
| 18 | any hospital, nursing home, community-based residential facility, county home,                               |
| 19 | county infirmary, county hospital, county mental health center, tuberculosis                                 |
| 20 | sanatorium or other place licensed or approved by the department under s. 49.70,                             |
| 21 | 49.71, 49.72, 50.02, 50.03, 50.35, 51.08, or 51.09, 58.06, 252.073 or 252.076 or a                           |
| 22 | facility under s. 45.365, 51.05, 51.06, 233.40, 233.41, 233.42 or 252.10.                                    |
| 23 | SECTION 2280. 153.05 (6m) of the statutes is amended to read:                                                |
| 24 | 153.05 (6m) The department may contract with the group insurance board for                                   |
| 25 | the provision of data collection and analysis services related to health maintenance                         |

organizations and insurance companies that provide health insurance for state employes. The department shall establish contract fees for the provision of the services. All moneys collected under this subsection shall be credited to the appropriation under s. 20.435 (1) (4) (hg).

SECTION 2280b. 153.45 (1) (b) of the statutes is renumbered 153.45 (1) (b) 1. and amended to read:

ambulatory surgery centers, public use data files which that do not permit the identification of specific patients, employers or health care providers, as defined by rules promulgated by the department. The identification of these groups patients, employers or health care providers shall be protected by all necessary means, including the deletion of patient identifiers and the use of calculated variables and aggregated variables.

**Section 2280c.** 153.45 (1) (b) 2. of the statutes is created to read:

other than hospitals or ambulatory surgery centers, public use data files that do not permit the identification of specific patients, employers or health care providers, as defined by rules promulgated by the department. The identification of patients, employers or health care providers shall be protected by all necessary means, including the deletion of patient identifiers; the use of calculated variables and aggregated variables; the specification of counties as to residence, rather than zip codes; the use of 5—year categories for age, rather than exact age; not releasing information concerning a patient's race or ethnicity or dates of admission, discharge, procedures or visits; and masking sensitive diagnoses and procedures by use of

| 1  | larger diagnostic and procedure categories. Public use data files under this            |
|----|-----------------------------------------------------------------------------------------|
| 2  | subdivision may include only the following:                                             |
| 3  | a. The patient's county of residence.                                                   |
| 4  | b. The payment source, by type.                                                         |
| 5  | c. The patient's age category, by 5-year intervals up to age 80 and a category          |
| 6  | of 80 years or older.                                                                   |
| 7  | d. The patient's procedure code.                                                        |
| 8  | e. The patient's diagnosis code.                                                        |
| 9  | f. Charges assessed with respect to the procedure code.                                 |
| 10 | g. The name and address of the facility in which the patient's services were            |
| 11 | rendered.                                                                               |
| 12 | h. The patient's sex.                                                                   |
| 13 | i. Information that contains the name of a health care provider that is not a           |
| 14 | hospital or ambulatory surgery center, if the independent review board first reviews    |
| 15 | and approves the release or if the department promulgates rules that specify            |
| 16 | circumstances under which the independent review board need not review and              |
| 17 | approve the release.                                                                    |
| 18 | j. Calendar quarters of service, except if the department specifies by rule that        |
| 19 | the number of data elements included in the public use data file is too small to enable |
| 20 | protection of patient confidentiality.                                                  |
| 21 | k. Information other than patient-identifiable data, as defined in s. $153.50(1)$       |
| 22 | (b), as approved by the independent review board.                                       |
| 23 | <b>SECTION 2280e.</b> 153.45 (1) (c) of the statutes is renumbered 153.45 (1) (c)       |
| 24 | (intro.) and amended to read:                                                           |

| 153.45 (1) (c) (intro.) Custom-designed reports containing portions of the data       |
|---------------------------------------------------------------------------------------|
| under par. (b). Of information submitted by health care providers that are not        |
| hospitals or ambulatory surgery centers, requests under this paragraph for data       |
| elements other than those available for public use data files under par. (b) 2.,      |
| including the patient's month and year of birth, require review and approval by the   |
| independent review board before the data elements may be released. Information        |
| that contains the name of a health care provider that is not a hospital or ambulatory |
| surgery center may be released only if the independent review board first reviews     |
| and approves the release or if the department promulgates rules that specify          |
| circumstances under which the independent review board need not review and            |
| approve the release. Reports under this paragraph may include the patient's zip code  |
| only if at least one of the following applies:                                        |
| <b>SECTION 2280f.</b> 153.45 (1) (c) 1. to 4. of the statutes are created to read:    |
| 153.45 (1) (c) 1. Other potentially identifying data elements are not released.       |
| 2. Population density is sufficient to mask patient identity.                         |
| 3. Other potentially identifying data elements are grouped to provide                 |
| population density sufficient to protect identity.                                    |
| 4. Multiple years of data elements are added to protect identity.                     |
| SECTION 2280g. 153.45 (6) of the statutes is created to read:                         |
| 153.45 (6) The department may not sell or distribute data bases of information,       |
| from health care providers who are not hospitals or ambulatory surgery centers, that  |
| are able to be linked with public use data files, unless first approved by the        |
| independent review board.                                                             |

**Section 2280ge.** 153.50 (1) (a) of the statutes is renumbered 153.01 (2m).

| 1  | <b>Section 2280gg.</b> 153.50 (1) (b) of the statutes is renumbered 153.50 (1) (b) 1., |
|----|----------------------------------------------------------------------------------------|
| 2  | and 153.50 (1) (b) 1. (intro.), as renumbered, is amended to read:                     |
| 3  | 153.50 (1) (b) 1. (intro.) "Patient-identifiable data", for information submitted      |
| 4  | by hospitals and ambulatory surgery centers, means all of the following data           |
| 5  | elements:                                                                              |
| 6  | SECTION 2280gm. 153.50 (1) (b) 2. of the statutes is created to read:                  |
| 7  | 153.50 (1) (b) 2. "Patient-identifiable data", for information submitted by            |
| 8  | health care providers who are not hospitals or ambulatory surgery centers, means       |
| 9  | all of the following data elements:                                                    |
| 10 | a. Data elements specified in subd. 1. a. to g., L. and m.                             |
| 11 | b. Whether the patient's condition is related to employment, and occurrence            |
| 12 | and place of an auto accident or other accident.                                       |
| 13 | c. Date of first symptom of current illness, of current injury or of current           |
| 14 | pregnancy.                                                                             |
| 15 | d. First date of patient's same or similar illness, if any.                            |
| 16 | e. Dates that the patient has been unable to work in his or her current                |
| 17 | occupation.                                                                            |
| 18 | f. Dates of receipt by patient of medical service.                                     |
| 19 | g. The patient's city, town or village.                                                |
| 20 | SECTION 2280h. 153.50 (2) of the statutes is repealed.                                 |
| 21 | <b>SECTION 2280i.</b> 153.50 (3) (b) 7. of the statutes is created to read:            |
| 22 | 153.50 (3) (b) 7. The patient's account number, after use only as verification of      |
| 23 | data by the department.                                                                |
| 24 | SECTION 2280j. 153.50 (3) (c) of the statutes is created to read:                      |

| 1  | 153.50 (3) (c) Develop, for use by purchasers of data under this chapter, a data       |
|----|----------------------------------------------------------------------------------------|
| 2  | use agreement that specifies data use restrictions, appropriate uses of data and       |
| 3  | penalties for misuse of data, and notify prospective and current purchasers of data    |
| 4  | of the appropriate uses.                                                               |
| 5  | SECTION 2280k. 153.50 (3) (d) of the statutes is created to read:                      |
| 6  | 153.50 (3) (d) Require that a purchaser of data under this chapter sign and have       |
| 7  | notarized the data use agreement of the department specified in par. (c).              |
| 8  | SECTION 2280km. 153.50 (3m) of the statutes is created to read:                        |
| 9  | 153.50 (3m) Health care provider measures to ensure patient identity                   |
| 10 | PROTECTION. A health care provider that is not a hospital or ambulatory surgery        |
| 11 | center shall, before submitting information required by the department under this      |
| 12 | chapter, convert to a payer category code as specified by the department any names     |
| 13 | of an insured's payer or other insured's payer.                                        |
| 14 | <b>SECTION 2280kp.</b> 153.50 (4) (intro.) of the statutes is renumbered 153.50 (4)    |
| 15 | (a) (intro.) and amended to read:                                                      |
| 16 | 153.50 (4) (a) (intro.) Under Except as specified in par. (b), under the               |
| 17 | procedures specified in sub. (5), release of patient-identifiable data may be made     |
| 18 | only to any of the following:                                                          |
| 19 |                                                                                        |
| 20 | SECTION 2280kq. 153.50 (4) (a) of the statutes is repealed.                            |
| 21 | <b>SECTION 2280kr.</b> 153.50 (4) (b) to (e) of the statutes are renumbered 153.50 (4) |
| 22 | (a) 1. to 4.                                                                           |
| 23 | SECTION 2280ks. 153.50 (4) (b) of the statutes is created to read:                     |
| 24 | 153.50 (4) (b) Of information submitted by health care providers that are not          |
| 25 | hospitals or ambulatory surgery centers, patient-identifiable data that contain a      |

| 1  | patient's date of birth may be released under par. (a) only under circumstances as      |
|----|-----------------------------------------------------------------------------------------|
| 2  | specified by rule by the department.                                                    |
| 3  | SECTION 2280ku. 153.50 (5) (a) (intro.) of the statutes is amended to read:             |
| 4  | 153.50 (5) (a) (intro.) The department may not release or provide access to             |
| 5  | patient-identifiable data to a person authorized under sub. (4) (a), (c), (d) or (e)    |
| 6  | unless the authorized person requests the department, in writing, to release the        |
| 7  | patient-identifiable data. The request shall include all of the following:              |
| 8  | SECTION 2280kv. 153.50 (5) (a) 3. of the statutes is amended to read:                   |
| 9  | 153.50 (5) (a) 3. For a person who is authorized under sub. (4) (a), (c) or (d) to      |
| 10 | receive or have access to patient-identifiable data, evidence, in writing, that         |
| 11 | indicates that authorization.                                                           |
| 12 | Section 2280kw. 153.50 (5) (a) 4. (intro.) of the statutes is amended to read:          |
| 13 | 153.50 (5) (a) 4. (intro.) For an entity that is authorized under sub. (4) (e) (a)      |
| 14 | 4. to receive or have access to patient-identifiable data, evidence, in writing, of all |
| 15 | of the following:                                                                       |
| 16 | SECTION 2280kx. 153.50 (5) (b) 3. of the statutes is amended to read:                   |
| 17 | 153.50 (5) (b) 3. For a person who believes that he or she is authorized under          |
| 18 | sub. (4) (a), the action provided under s. 19.37.                                       |
| 19 | SECTION 2280n. 153.50 (5m) of the statutes is created to read:                          |
| 20 | 153.50 (5m) Employers not to request patient-identifiable data.                         |
| 21 | Notwithstanding subs. (4) and (5) no employer may request the release of or access      |
| 22 | to patient-identifiable data of an employe of the employer.                             |
| 23 | <b>Section 2280p.</b> 153.50 (6) of the statutes is renumbered 153.50 (6) (a).          |
| 24 | SECTION 2280q. 153.50(6)(b), (c), (d) and (e) of the statutes are created to read:      |

| 1  | 153.50 (6) (b) The department may not require under this chapter a health care       |
|----|--------------------------------------------------------------------------------------|
| 2  | provider that is not a hospital or ambulatory surgery center to submit uniform       |
| 3  | patient billing forms.                                                               |
| 4  | (c) A health care provider that is not a hospital or ambulatory surgery center       |
| 5  | may not submit any of the following to the department under the requirements of      |
| 6  | this chapter:                                                                        |
| 7  | 1. The data elements specified under sub. (3) (b).                                   |
| 8  | 2. The patient's telephone number.                                                   |
| 9  | 3. The insured's employer's name or school name.                                     |
| 10 | 4. Data regarding insureds other than the patient, other than the payer              |
| 11 | category code under sub. (3m).                                                       |
| 12 | 5. The patient's employer's name or school name.                                     |
| 13 | 6. The patient's relationship to the insured.                                        |
| 14 | 7. The insured's identification number.                                              |
| 15 | 8. The insured's policy or group number.                                             |
| 16 | 9. The insured's date of birth or sex.                                               |
| 17 | 10. The patient's marital, employment or student status.                             |
| 18 | (d) If a health care provider that is not a hospital or ambulatory surgery center    |
| 19 | submits a data element that is specified in par. (c) 1. to 10., the department shall |
| 20 | immediately return this information to the health care provider or, if discovered    |
| 21 | later, shall remove and destroy the information.                                     |
| 22 | (e) A health care provider may not submit information that uses any of the           |
| 23 | following as a patient account number:                                               |
| 24 | 1. The patient's social security number or any substantial portion of the            |
| 25 | patient's social security number.                                                    |
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2. A number that is related to another patient identifying number.

**SECTION 2280r.** 153.55 of the statutes is amended to read:

153.55 Protection of health care provider confidentiality. Health care provider identifiable data Data obtained under this chapter is not subject to inspection, copying or receipt under s. 19.35 (1).

SECTION 2281. 153.60 (1) of the statutes is amended to read:

The department shall, by the first October 1 after the 153.60 **(1)** commencement of each fiscal year, estimate the total amount of expenditures under this chapter for the department and the board for that fiscal year for data collection, data base development and maintenance, generation of data files and standard reports, orientation and training provided under s. 153.05 (9) and maintaining the board. The department shall assess the estimated total amount for that fiscal year less the estimated total amount to be received for purposes of administration of this chapter under s.  $20.435 \frac{(1)}{(4)}$  (hi) during the fiscal year, the unencumbered balance of the amount received for purposes of administration of this chapter under s. 20.435 (1) (4) (hi) from the prior fiscal year and the amount in the appropriation account under s. 20.435(1)(dg) for the fiscal year, to health care providers who are in a class of health care providers from whom the department collects data under this chapter in a manner specified by the department by rule. The department shall obtain approval from the board for the amounts of assessments for health care providers other than hospitals and ambulatory surgery centers. The department shall work together with the department of regulation and licensing to develop a mechanism for collecting assessments from health care providers other than hospitals and ambulatory surgery centers. No health care provider that is not a facility may be assessed under this subsection an amount that exceeds \$75 per fiscal year. Each

hospital shall pay the assessment on or before December 1. All payments of assessments shall be deposited in the appropriation under s. 20.435 (1) (4) (hg).

**SECTION 2282.** 153.60 (3) of the statutes is amended to read:

153.60 (3) The department shall, by the first October 1 after the commencement of each fiscal year, estimate the total amount of expenditures required for the collection, database development and maintenance and generation of public data files and standard reports for health care plans that voluntarily agree to supply health care data under s. 153.05 (6r). The department shall assess the estimated total amount for that fiscal year to health care plans in a manner specified by the department by rule and may enter into an agreement with the office of the commissioner of insurance for collection of the assessments. Each health plan that voluntarily agrees to supply this information shall pay the assessments on or before December 1. All payments of assessments shall be deposited in the appropriation under s. 20.435 (1) (4) (hg) and may be used solely for the purposes of s. 153.05 (6r).

**SECTION 2283.** 153.65 of the statutes is amended to read:

153.65 Provision of special information; user fees. The department may, but is not required to, provide, upon request from a person, a data compilation or a special report based on the information collected by the department. The department shall establish user fees for the provision of these compilations or reports, payable by the requester, which shall be sufficient to fund the actual necessary and direct cost of the compilation or report. All moneys collected under this section shall be credited to the appropriation under s. 20.435 (1) (4) (hi).

**Section 2283g.** 153.67 of the statutes is created to read:

153.67 Independent review board. The independent review board shall review any request under s. 153.45 (1) (c) for data elements other than those

| 1  | available for public use data files under s. 153.45 (1) (b). Unless the independent         |
|----|---------------------------------------------------------------------------------------------|
| 2  | review board approves such a request or unless independent review board approval            |
| 3  | is not required under rules of the department promulgated under s. 153.45 (1) (c)           |
| 4  | (intro.), the data elements requested may not be released.                                  |
| 5  | SECTION 2283h. 153.76 of the statutes is created to read:                                   |
| 6  | 153.76 Rule-making by the independent review board.                                         |
| 7  | Notwithstanding s. 15.01 (1r), the independent review board may promulgate only             |
| 8  | those rules that are first reviewed and approved by the board on health care                |
| 9  | information.                                                                                |
| 10 | SECTION 2283i. 153.85 of the statutes is amended to read:                                   |
| 11 | 153.85 Civil liability. Any Except as provided in s. 153.86, any person                     |
| 12 | violating s. $153.50$ or rules promulgated under s. $153.75(1)(a)$ is liable to the patient |
| 13 | for actual damages and costs, plus exemplary damages of up to \$1,000 for a negligent       |
| 14 | violation and up to \$5,000 for an intentional violation.                                   |
| 15 | SECTION 2283j. 153.86 of the statutes is created to read:                                   |
| 16 | 153.86 Immunity from liability. (1) A health care provider that submits                     |
| 17 | information to the department under this chapter is immune from civil liability for         |
| 18 | all of the following:                                                                       |
| 19 | (a) Any act or omission of an employe, official or agent of the health care                 |
| 20 | provider that results in the release of a prohibited data element while submitting          |
| 21 | data to the department.                                                                     |
| 22 | (b) Any act or omission of the department that results in the release of data.              |
| 23 | (2) The immunity provided under this section does not apply to intentional,                 |
| 24 | wilful or reckless acts or omissions by health care providers.                              |
| 25 | SECTION 2283k. 153.90 (1) of the statutes is amended to read:                               |

| 1  | 153.90 (1) Whoever intentionally violates s. 153.45 (5) or 153.50 or rules               |
|----|------------------------------------------------------------------------------------------|
| 2  | promulgated under s. $153.75(1)(a)$ may be fined not more than $\$10,000$ $\$15,000$ or  |
| 3  | imprisoned for not more than 9 months one year in the county jail or both.               |
| 4  | SECTION 2283m. 154.17 (1) of the statutes is amended to read:                            |
| 5  | 154.17 (1) "Do-not-resuscitate bracelet" means a standardized identification             |
| 6  | bracelet of uniform size, color, and design, that meets the specifications established   |
| 7  | under s. 154.27 (1), or that is approved by the department under s. 154.27 (2), that     |
| 8  | bears the inscription "Do Not Resuscitate" and signifies that the wearer is a qualified  |
| 9  | patient who has obtained a do-not-resuscitate order and that the order has not been      |
| 10 | revoked.                                                                                 |
| 11 | <b>SECTION 2283n.</b> 154.19 (2) (b) of the statutes is renumbered 154.19 (2) (b)        |
| 12 | (intro.) and amended to read:                                                            |
| 13 | 154.19 (2) (b) (intro.) After providing the information under par. (a), the              |
| 14 | attending physician, or the person directed by the attending physician, shall affix      |
| 15 | document in the patient's medical record the medical condition that qualifies the        |
| 16 | patient for the do-not-resuscitate order, shall make the order in writing and shall      |
| 17 | do one of the following, as requested by the qualified patient:                          |
| 18 | 1. Affix to the wrist of the patient a do-not-resuscitate bracelet and document          |
| 19 | in the patient's medical record the medical condition that qualifies the patient for the |
| 20 | do-not-resuscitate order that meets the specifications established under s. 154.27       |
| 21 | <u>(1)</u> .                                                                             |
| 22 | <b>SECTION 2283p.</b> 154.19 (2) (b) 2. of the statutes is created to read:              |
| 23 | 154.19 (2) (b) 2. Provide an order form from a commercial vendor approved by             |
| 24 | the department under s. 154.27 (2) to permit the patient to order a                      |
| 25 | do-not-resuscitate bracelet from the commercial vendor.                                  |

SECTION 2283q. 154.27 of the statutes is renumbered 154.27 (1) and amended to read:

154.27 (1) The department shall establish by rule a uniform standard for the size, color, and design of all do—not—resuscitate bracelets. The Except as provided in sub. (2), the rules shall require that the do—not—resuscitate bracelets include the inscription "Do Not Resuscitate"; the name, address, date of birth and gender of the patient; and the name, business telephone number and signature of the attending physician issuing the order.

Section 2283r. 154.27 (2) of the statutes is created to read:

developed and distributed by a commercial vendor if the bracelet contains an emblem that displays an internationally recognized medical symbol on the front and the words "Wisconsin Do-Not-Resuscitate-EMS" and the qualified patient's first and last name on the back. The department may not approve a do-not-resuscitate bracelet developed and distributed by a commercial vendor if the vendor does not require a doctor's order for the bracelet prior to distributing it to a patient.

SECTION 2283rm. 155.01 (6) of the statutes is amended to read:

155.01 (6) "Health care facility" means a facility, as defined in s. 647.01 (4), or any hospital, nursing home, community—based residential facility, county home, county infirmary, county hospital, county mental health center, tuberculosis sanatorium or other place licensed or approved by the department under s. 49.70, 49.71, 49.72, 50.02, 50.03, 50.35, 51.08, or 51.09, 58.06, 252.073 or 252.076 or a facility under s. 45.365, 51.05, 51.06, 233.40, 233.41, 233.42 or 252.10.

**SECTION 2283t.** 157.065 (3) of the statutes is renumbered 157.065 (3) (a).

| SECTION 2283u. | 157.065 (3) (b) | of the statutes is created | l to read: |
|----------------|-----------------|----------------------------|------------|
|----------------|-----------------|----------------------------|------------|

157.065 (3) (b) Any private military academy that provides an educational program for grades 7 to 12 in a 4th class city may establish a private cemetery within the city on land that the military academy owns, if the common council consents. No mausolcum within a cemetery established under this paragraph may exceed 3,500 square feet in area.

## SECTION 2288b. 165.755 (1) (a) of the statutes is amended to read:

165.755 (1) (a) Except as provided in par. (b), beginning on October 14, 1997, a court shall impose a crime laboratories and drug law enforcement assessment of \$4\_\$5 if the court imposes a sentence, places a person on probation or imposes a forfeiture for a violation of state law or for a violation of a municipal or county ordinance.

## Section 2288f. 165.76 (1) (a) of the statutes is amended to read:

165.76 (1) (a) Is in prison or a secured correctional facility, as defined in s. 938.02 (15m), or a secured child caring institution, as defined in s. 938.02 (15g) or on probation, extended supervision, parole, supervision or aftercare supervision on or after August 12, 1993, for any violation of s. 940.225 (1) or (2), 948.02 (1) or (2) or 948.025.

SECTION 2288g. 165.76(1)(a) of the statutes, as affected by 1999 Wisconsin Act .... (this act), is amended to read:

165.76 (1) (a) Is in a secured correctional facility, as defined in s. 938.02 (15m), or a secured child caring institution, as defined in s. 938.02 (15g), or a secured group home, as defined in s. 938.02 (15p), or on probation, extended supervision, parole, supervision or aftercare supervision on or after August 12, 1993, for any violation of s. 940.225 (1) or (2), 948.02 (1) or (2) or 948.025.

| 1          | SECTION 2288h. 165.76 (1) (ag) of the statutes is created to read:                         |
|------------|--------------------------------------------------------------------------------------------|
| 2          | 165.76 (1) (ag) Is in prison on or after August 12, 1993, and before January 1,            |
| 3          | 2000, for any violation of s. 940.225 (1) or (2), 948.02 (1) or (2) or 948.025.            |
| 4          | SECTION 2288i. 165.76 (1) (ar) of the statutes is created to read:                         |
| 5          | 165.76 (1) (ar) Is in prison on or after January 1, 2000, for a felony committed           |
| 6          | in this state.                                                                             |
| 7          | SECTION 2288L. 165.76 (1) (e) of the statutes is amended to read:                          |
| 8          | 165.76 (1) (e) Is released on parole or extended supervision or placed on                  |
| 9          | probation in another state before January 1, 2000, and is on parole, extended              |
| 10         | supervision or probation in this state from another the other state under s. 304.13        |
| 11         | or 304.135 on or after July 9, 1996, for a violation of the law of another the other state |
| 12         | that the department of corrections determines, under s. 304.137 (1), is comparable         |
| 13         | to a violation of s. 940.225 (1) or (2), 948.02 (1) or (2) or 948.025.                     |
| 14         | SECTION 2288m. 165.76 (1) (f) of the statutes is created to read:                          |
| 15         | 165.76 (1) (f) Is released on parole or extended supervision or placed on                  |
| 16         | probation in another state on or after January 1, 2000, and is on parole, extended         |
| 17         | supervision or probation in this state from the other state under s. 304.13 or 304.135     |
| 18         | for a violation of the law of the other state that the department of corrections           |
| 19         | determines, under s. 304.137 (2), would constitute a felony if committed by an adult       |
| 20         | in this state.                                                                             |
| 21         | SECTION 2289t. 165.842 of the statutes is created to read:                                 |
| 22         | 165.842 Motor vehicle stops; collection of information; annual report                      |
| 23         | (1) Definitions. In this section:                                                          |
| 24         | (a) "Department" means the department of justice.                                          |
| <b>2</b> 5 | (b) "Law enforcement agency" has the meaning given in s. 165.77 (1) (b).                   |

- (c) "Law enforcement officer" means a person who is employed by a law enforcement agency for the purpose of detecting and preventing crime and enforcing laws or ordinances and who is authorized to make arrests for violations of the laws or ordinances the person is employed to enforce, whether that enforcement authority extends to all laws or ordinances or is limited to specific laws or ordinances.
- (d) "Motor vehicle stop" means the stop of a motor vehicle that is traveling in any public or private place, or the detention of an occupied motor vehicle that is already stopped in any public or private place, for the purpose of investigating any alleged or suspected violation of a state or federal law or city, village, town or county ordinance.
- (2) Information collection required. All persons in charge of law enforcement agencies shall obtain, or cause to be obtained, all of the following information with respect to each motor vehicle stop made on or after January 1, 2001, by a law enforcement officer employed by the law enforcement agency:
  - (a) The reason the law enforcement officer stopped the motor vehicle.
  - (b) The age, gender and race or ethnicity of the driver of the motor vehicle.
  - (c) The number of persons in the motor vehicle.
- (d) Whether a search was conducted of the motor vehicle, the driver of the motor vehicle or any passenger in the motor vehicle, and for each search conducted all of the following information:
- 1. Whether the search was based on probable cause or reasonable suspicion, on the consent of the person searched or, for a motor vehicle search, on the consent of the driver or other authorized person.
- 2. If the search was of a passenger in the motor vehicle, the age, gender and race or ethnicity of the passenger.

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3. What, if anything, was seized as a result of the search. 1 (e) Whether a person was asked to give consent to a search of the motor vehicle 2 or of his or her person but refused to give consent. 3 (f) Whether the motor vehicle stop or a search conducted during the stop 4 resulted in the driver or any passenger being given a written warning of or a citation 5 for a violation of any law or ordinance and, if so, a listing of each warning or citation 6 given and the alleged violation for which the warning or citation was given. 7 (g) Whether the motor vehicle stop or a search conducted during the stop 8 resulted in the arrest of the driver or any passenger and, if so, a listing of each arrest 9 made and the reason for the arrest. 10 (h) Any other information required to be collected under the rules promulgated 11 by the department under sub. (5). 12 (3) Submission of information collected. The information obtained by a law 13 enforcement agency under sub. (2) shall be forwarded to the department using the 14 form prescribed by the rules promulgated under sub. (5) and in accordance with the 15 reporting schedule established under the rules promulgated under sub. (5). 16 (4) Analysis and report by department. (a) The department shall compile the 17 information submitted to it by law enforcement agencies under sub. (3) and shall 18 analyze the information, along with any other relevant information, to determine 19 whether law enforcement officers target racial minorities when making motor 20 vehicle stops to investigate alleged or suspected violations of federal, state or local 21 laws or ordinances. 22 (b) For each calendar year, the department shall prepare an annual report that

summarizes the information submitted to it by law enforcement agencies concerning

motor vehicle stops made during the calendar year and that describes the methods

- and conclusions of its analysis of the information. On or before March 31, 2002, and on or before each March 31 thereafter, the department shall submit the annual report required under this paragraph to the legislature under s. 13.172 (2), to the governor and to the director of state courts.
- (5) Rules (a) The department shall promulgate rules to implement the requirements of this section, including rules prescribing a form for use in obtaining information under sub. (2) and establishing a schedule for forwarding the information obtained to the department. The department shall make the form prescribed by its rules available to law enforcement agencies.
- (b) The department may by rule require the collection of information in addition to that specified in sub. (2) (a) to (g) if the department determines that the information will help to determine whether law enforcement officers target racial minorities when making motor vehicle stops to investigate alleged or suspected violations of federal, state or local laws or ordinances.

**SECTION 2289d.** 165.76 (2) (b) 2. of the statutes is amended to read:

165.76 (2) (b) 2. If the person has been sentenced to prison or placed in a secured correctional facility er, a secured child caring institution or a secured group home, he or she shall provide the specimen under par. (a) at the office of a county sheriff as soon as practicable after release on parole, extended supervision or aftercare supervision, as directed by his or her probation, extended supervision and parole agent or aftercare agent, except that the department of corrections or the county department under s. 46.215, 46.22 or 46.23 operating the secured group home in which the person is placed may require the person to provide the specimen while he or she is in prison or in a the secured correctional facility er a, secured child caring institution or secured group home.

| 1  | SECTION 2289d. $165.85 (3m) (b)$ of the statutes is renumbered $165.85 (3m) (b)$         |
|----|------------------------------------------------------------------------------------------|
| 2  | 1. and amended to read:                                                                  |
| 3  | 165.85 (3m) (b) 1. Request that an individual provide the board with his or her          |
| 4  | social security number when he or she applies for certification or recertification       |
| 5  | under this section. If Except as provided in subd. 2., if an individual who is requested |
| 6  | by the board to provide his or her social security number under this paragraph does      |
| 7  | not comply with the board's request, the board shall deny the individual's application   |
| 8  | for certification or recertification. The board may disclose a social security number    |
| 9  | provided by an individual under this paragraph only to the department of workforce       |
| 10 | development as provided in a memorandum of understanding entered into with the           |
| 11 | department of workforce development under s. 49.857.                                     |
| 12 | <b>SECTION 2289e.</b> 165.85 (3m) (b) 2. of the statutes is created to read:             |
| 13 | 165.85 (3m) (b) 2. As a condition of applying for certification or recertification,      |
| 14 | an individual who does not have a social security number shall submit a statement        |
| 15 | made or subscribed under oath or affirmation to the board that he or she does not        |
| 16 | have a social security number. The form of the statement shall be prescribed by the      |
| 17 | department of workforce development. A certification or recertification issued in        |
| 18 | reliance on a false statement submitted under this subdivision is invalid.               |
| 19 | <b>SECTION 2290.</b> 165.85 (5m) of the statutes is repealed.                            |
| 20 | SECTION 2290v. 165.87 (title) of the statutes is repealed.                               |
| 21 | SECTION 2291. 165.87 (1) (title) of the statutes is repealed.                            |
| 22 | SECTION 2292m. 165.87 (1) (a) of the statutes is renumbered 757.05 (2) (a) and           |
| 23 | amended to read:                                                                         |
| 24 | 757.05 (2) (a) <u>Law enforcement training fund.</u> Twenty-seven fifty-fifths of al     |
| 25 | moneys collected from penalty assessments under this section sub. (1) shall be           |

limitations:

25

| 1  | credited to the appropriation account under s. 20.455 (2) (i) and utilized in                                 |
|----|---------------------------------------------------------------------------------------------------------------|
| 2  | accordance with ss. $20.455(2)$ and $165.85(5)$ and $(5m)$ . The moneys credited to the                       |
| 3  | appropriation account under s. $20.455(2)(i)$ , except for the moneys transferred to s.                       |
| 4  | 20.455 (2) (jb), constitute the law enforcement training fund.                                                |
| 5  | <b>SECTION 2293.</b> 165.87 (1) (b) of the statutes is repealed.                                              |
| 6  | <b>SECTION 2294m.</b> 165.87 (1) (bn) of the statutes is renumbered 16.964 (4) and                            |
| 7  | amended to read:                                                                                              |
| 8  | 16.964 (4) Five twenty-seconds of all moneys collected from penalty                                           |
| 9  | assessments under this section shall be credited to the appropriation account under                           |
| 10 | and utilized in accordance with s. $20.505(6)(g)$ , except for moneys transferred to ss.                      |
| 11 | 20.410(3)(kj) and $20.505(6)(h)$ . In regard to any grant the office makes to any local                       |
| 12 | unit of government for which the state is providing matching funds from moneys                                |
| 13 | under this paragraph s. 20.505 (6) (kp), the local unit of government shall provide                           |
| 14 | matching funds equal to at least 10%.                                                                         |
| 15 | <b>SECTION 2295.</b> 165.87 (1) (bp) of the statutes is repealed.                                             |
| 16 | <b>SECTION 2296.</b> 165.87 (1) (br) of the statutes is repealed.                                             |
| 17 | <b>SECTION 2297.</b> 165.87 (1) (c) of the statutes is repealed.                                              |
| 18 | <b>SECTION 2298.</b> 165.87 (2) of the statutes is renumbered 757.05 (1).                                     |
| 19 | SECTION 2299. 165.90 (4) (intro.) of the statutes is amended to read:                                         |
| 20 | 165.90 (4) (intro.) If the department approves a plan, the department shall                                   |
| 21 | certify the program as eligible to receive aid under s. $20.455(2)\frac{(d) \text{ and } (hn)}{(kt)}$ . Prior |
| 22 | to January 15, of the year for which funding is sought, the department shall                                  |
| 23 | distribute from the appropriations under s. $20.455(2)(d)$ and $(hn)(kt)$ to each eligible                    |
| 24 | program the amount necessary to implement the plan, subject to the following                                  |
|    |                                                                                                               |

| 1  | <b>SECTION 2300.</b> $165.90(4)(a)$ of the statutes is amended to read:               |
|----|---------------------------------------------------------------------------------------|
| 2  | 165.90 (4) (a) A program may use funds received under s. $20.455$ (2) (d) or (hn)     |
| 3  | (kt) only for law enforcement operations.                                             |
| 4  | SECTION 2301. 165.90 (4) (b) of the statutes is amended to read:                      |
| 5  | 165.90 (4) (b) A program shall, prior to the receipt of funds under s. 20.455 (2)     |
| 6  | (d) or (hn) (kt) for the 2nd and any subsequent year, submit a report to the          |
| 7  | department regarding the performance of law enforcement activities on the             |
| 8  | reservation in the previous fiscal year.                                              |
| 9  | <b>SECTION 2301m.</b> 166.03 (2) (a) 6. of the statutes is created to read:           |
| 10 | 166.03 (2) (a) 6. Purchase from the appropriation under s. 20.465 (3) (a), at a       |
| 11 | cost not to exceed \$110,000, infrared optical equipment to be located and maintained |
| 12 | by the Chippewa County emergency management agency and used by the civil air          |
| 13 | patrol to search for lost individuals.                                                |
| 14 | SECTION 2302. 166.15 (1) (f) of the statutes is amended to read:                      |
| 15 | 166.15 (1) (f) "Nuclear incident" means any sudden or nonsudden release of            |
| 16 | ionizing radiation, as defined under s. 254.31 (3g), from radioactive waste being     |
| 17 | stored or disposed of in a waste repository or transported. "Nuclear incident" does   |
| 18 | not include any release of radiation from radioactive waste being transported under   |
| 19 | routine operations.                                                                   |
| 20 | SECTION 2302m. 166.20 (5) (a) 3. of the statutes is amended to read:                  |
| 21 | 166.20 (5) (a) 3. All facilities in this state covered under 42 USC 11021 and all     |
| 22 | public agencies and private agencies in this state at which a hazardous chemical is   |
| 23 | present at or above an applicable threshold quantity shall comply with the reporting  |
| 24 | requirements under 42 USC 11021 and 11022. The division shall implement               |

minimum threshold levels for reporting by retail gas stations that are identical to the
 minimum threshold levels for reporting under 42 USC 11021 and 11022.

**SECTION 2303.** 166.20 (7g) of the statutes is repealed.

**SECTION 2303b.** 166.215 (1) of the statutes is amended to read:

166.215 (1) The Beginning July 1, 2001, the division shall contract with ne fewer than 7 and no more than 9 regional emergency response teams, each of which will one of which shall be located in La Crosse County. Each regional emergency response team shall assist in the emergency response to level A releases in a region of this state designated by the division. The division shall contract with at least one regional emergency response team in each area designated under s. 166.03 (2) (b) 1. The division may only contract with a local agency, as defined in s. 166.22 (1) (c), under this subsection. A member of a regional emergency response team shall meet the standards for a hazardous materials specialist in 29 CFR 1910.120 (q) (6) (iv) and national fire protection association standards NFPA 471 and 472. Payments to regional emergency response teams under this subsection shall be made from the appropriation account under s. 20.465 (3) (dd).

**SECTION 2303d.** 166.215 (5) of the statutes is amended to read:

166.215 (5) The division shall notify the joint committee on finance in writing, before entering into a new contractual agreement under sub. (1) or renewing or extending a contractual agreement under sub. (1), of the specific funding commitment involved in that proposed new, renewed or extended contract. The division shall include in that notification information regarding any anticipated contractual provisions that involve state fiscal commitments for each fiscal year in the proposed new, renewed or extended contract. The division may enter into a new contractual agreement or renew or extend a contractual agreement, as proposed in

## INSERT 1357-16

Section \$. 121.15 (3m) (a) 1. of the statutes is amended to read:

(2139m)

121.15 (3m) (a) 1. "Partial school revenues" means the sum of state school aids, other than the amounts appropriated under s. 20.255 (2) (bi) and (cv), and property taxes levied for school districts, less the amount of any revenue limit increase under s. 121.91 (4) (a) 2. due to a school board's increasing the services that it provides by adding responsibility for providing a service transferred to it from another school board and less the amount of any revenue limit increase under s. 121.91

(4) (a) 3

History: 1977 c. 29 s. 1098; 1977 c. 273; Stats. 1977 s. 121.15; 1979 c. 34; 1985 a. 29, 120; 1987 a. 27; 1989 a. 207; 1993 a. 16, 437; 1995 a. 27 ss. 4073 to 4075m, 9145 (1); 1997 a. 27, 113, 228; 1997 a. 237 ss. 368v to 369, 727p.

and less the amount of any revenue limit increase under 3.121.91(4)(h).

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loge 1125, line 22: Heleke the moteral beginning with the line 22 and and ending on page 1126, line 22 and